

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000006951

**Entity Name:** SABAL LAKES OF NEW SMYRNA HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Jun 09, 2016**  
**Secretary of State**  
**CC9067813827**

**Current Principal Place of Business:**

400 NUT TREE DRIVE  
DELAND, FL 32724

**Current Mailing Address:**

400 NUT TREE DRIVE  
DELAND, FL 32724

**FEI Number: 81-2097786**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BAUER, KIRK T ESQ.  
400 NUT TREE DRIVE  
DELAND, FL 32724 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name TITCOMB, KENT S  
Address 400 NUT TREE DRIVE  
City-State-Zip: DELAND FL 32724

Title D  
Name TITCOMB, LEYVI  
Address 400 NUT TREE DRIVE  
City-State-Zip: DELAND FL 32724

Title D  
Name JEFFREYS, MARIE  
Address 400 NUT TREE DRIVE  
City-State-Zip: DELAND FL 32724

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: MARIE JEFFREYS

DIRECTOR

06/09/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date